## FEC FORM 2 STATEMENT OF CANDIDACY

SECRETARY OF THE SENATE

14 MAY -1 PM 2:38

Mr. James E Risch										
(b) Address (number and street) 407 W Jefferson Street	☐ Check if	1	2. Candidate's FEC identification Number S8ID00092							
(c) City, State, and ZIP Code		<del></del>			3. Is		New			Amended
Boise 4. Party Affiliation		D	83702			tement	(N)	OR	×	(A)
REPUBLICAN PARTY	5. Office Sought					strict of Candidate		·	***************************************	·
THE COLONIAL PARTY	Senate			ID	00					
Di	ESIGNATION OF	PRINC	CIPAL (	CAMPAI	GN COM	MITTEE				
. I hereby designate the following na	med political committee	as my P	rincipal C	ampaign Co	mmittee for t	he 2014	4	election	n(s).	
NOTE: This designation should be	filed with the appropriat	te office lis	sted in the	instruction	S.	(year of	election)	l	` ,	
(a) Name of Committee (in full)										
Jim Risch for U.S. S	Senate Commit	tee								
(b) Address (number and street) 407 W Jefferson Street						<del></del>				
(c) City, State, and ZIP Code		<del></del>								
Boise					007	00 0040				
I hereby authorize the following name		Joint Fun	ndraising I	Representa	COMMI		expend	funds or	) beha	of my
I hereby authorize the following name candidacy.	Including) ed committee, which is	Joint Fun	ndraising I principal (	HORIZEI Representa	COMMI	TTEES	expend	funds or	n beha	ilf of my
I hereby authorize the following name candidacy.  NOTE: This designation should be file.	Including) ed committee, which is	Joint Fun	ndraising I principal (	HORIZEI Representa	COMMI	TTEES	expend	funds or	n beha	alf of my
I hereby authorize the following name candidacy.	(Including led committee, which is led with the principal ca	Joint Fun	ndraising I principal (	HORIZEI Representa	COMMI	TTEES	expend	funds or	n beha	ilf of my
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I hereby authorize the following name candidacy.  NOTE: This designation should be file.  (a) Name of Committee (in full)  Risch Victory Comm.  (b) Address (number and street)	(Including led committee, which is led with the principal ca	Joint Fun	ndraising I principal (	HORIZEI Representa	COMMI	TTEES	expend	funds or	n beha	ilf of my
I hereby authorize the following name candidacy.  NOTE: This designation should be fill (a) Name of Committee (in full)  Risch Victory Committee (b) Address (number and street)  228 S Washington Street	(Including led committee, which is led with the principal ca	Joint Fun	ndraising I principal (	HORIZEI Representa	COMMI	TTEES	expend	funds or	n beha	alf of my
I hereby authorize the following name candidacy.  NOTE: This designation should be fill (a) Name of Committee (in full)  Risch Victory Committee (b) Address (number and street)  228 S Washington Street  Suite 115	(Including led committee, which is led with the principal ca	Joint Fun	ndraising I principal (	HORIZEI Representa	O COMMI ives) ommittee, to	TTEES	expend	funds or	n beha	alf of my
I hereby authorize the following name candidacy.  NOTE: This designation should be file.  (a) Name of Committee (in full)  Risch Victory Comm.  (b) Address (number and street)  228 S Washington Street  Suite 115  (c) City, State, and ZIP Code  Alexandria	(Including led committee, which is led with the principal ca	NOT my	ndraising I	HORIZEI Represental campaign co	D COMMI ives) primittee, to	TTEES receive and	711-11-11-11			alf of my
I hereby authorize the following name candidacy.  NOTE: This designation should be file.  (a) Name of Committee (in full)  Risch Victory Comm.  (b) Address (number and street) 228 S Washington Street Suite 115  (c) City, State, and ZIP Code Alexandria	(Including led committee, which is led with the principal ca	NOT my	ndraising I	HORIZEI Represental campaign co	D COMMI ives) primittee, to	TTEES receive and	711-11-11-11			ilf of my
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I hereby authorize the following name candidacy.  NOTE: This designation should be file.  (a) Name of Committee (in full)  Risch Victory Comm.  (b) Address (number and street)  228 S Washington Street  Suite 115  (c) City, State, and ZIP Code  Alexandria  I certify that I have examenature of Candidate	(Including led committee, which is led with the principal ca	NOT my	ndraising I	HORIZEI Represental campaign co	D COMMI ives) primittee, to	TTEES receive and	711-11-11-11			alf of my
I hereby authorize the following name candidacy.  NOTE: This designation should be file (a) Name of Committee (in full)  Risch Victory Committee (in full)  (b) Address (number and street)  228 S Washington Street  Suite 115  (c) City, State, and ZIP Code  Alexandria  I certify that I have examinature of Candidate	(Including led committee, which is led with the principal candittee	NOT my mpaign co	est of my	VA	22314 and belief it is  Date 04/24/20	TTEES receive and	oct and co	· Pmplete.		

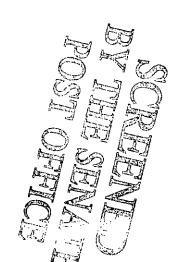
## FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003) **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** [ ADDITIONAL ] (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) 2014 Senators Classic Committee (b) Address (number and street) 228 S Washington Street Suite 115 (c) City, State and ZIP Code Alexandria VA 22314-5404 **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** [ ADDITIONAL ] (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) (b) Address (number and street) (c) City, State and ZIP Code **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** [ ADDITIONAL ] (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) (b) Address (number and street) (c) City, State and ZIP Code

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United States Senate

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RT SEMATE OFFICE SUITE 237 WASHINGTON, DC 20510-71 PHONE (202) 224-0327

THE PRECEDING DOCUMENT WAS:	
HAND DELIVERED	f Receipt
USPS FIRST CLASS MAIL	Postmark
USPS REGISTERED/CERTIFIED	Postmark
USPS PRIORITY MAIL  DELIVERY CONFIRMATION OR SIGNATU	Postmark RE CONFIRMATION LABEL
USPS EXPRESS MAIL	Postmark
OVERNIGHT DELIVERY SERVICE: SHIPPING D.	ATE NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	
UPS ———	
DHL	U
AIRBORNE EXPRESS	
RECEIVED FROM FEDERAL ELEC	TION COMMISSION
POSTMARK ILLEGIBLE	no postmark []
FAXDate of Receipt	
OTHER	or Postmark
PREPARER_DH	DATE PREPARED 5-1-14



